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Craig A. Slavin

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DEC 08 2003
TECHNOLOGY CENTER R3700

RCE/3463
PATENT

Docket No. 015916-261

Applicant: Bencini

Serial No.: 09/548,465

Filing Date: April 13, 2000

Title: Steerable Device For
Introducing Diagnostic And Therapeutic
Apparatus Into The Body

Group Art Unit: 3763

Examiner: Sirmons

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Mail Stop - RCE

REQUEST FOR CONTINUED EXAMINATION (RCE)
UNDER 37 C.F.R. § 1.114

Sir:

Applicant hereby requests Continued Examination of the above-identified application under 37 C.F.R. § 1.114.

1. Submission required under 37 C.F.R. § 1.114

- a. ☒ Previously submitted
 - i. ☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on November 6, 2003.
 - ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
 - iii. ☐ Other _____
- b. ☐ Enclosed
 - i. ☐ Amendment/Reply
 - ii. ☐ Affidavit(s)/Declaration(s)
 - iii. ☐ Information Disclosure Statement (IDS)
 - iv. ☐ Other _____

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required.)
- b. ☐ Other _____

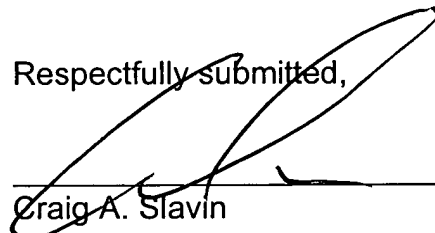
3. Fees

- a. ☐ The commissioner is hereby authorized to charge the following fees to our Deposit Account No. 50-0638
- i. ☐ RCE Fee required under 37 C.F.R. § 1.17(e)
- ii. ☐ Extension of Time Fee under 37 C.F.R. §§ 1.136 and 1.17
- iii. ☐ Other _____
- b. ☒ A checks in the amount of \$770 is enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0638. Should such fees be associated with an extension of time, applicant respectfully requests that this paper be considered a petition therefor.

11/29/03
Date

Respectfully submitted,



Craig A. Slavin
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Attorney for Applicant

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